

**APPLICATION FOR WAIVER OF
FEES, COSTS AND EXPENSES AND
APPOINTMENT OF COUNSEL ON APPEAL**

JD-CR-73 Rev. 7-04
C.G.S. § 52-259b; P.B. §§ 63-1, 63-5, 63-6, 63-7, 80-1

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.state.ct.us

FOR COURT USE ONLY

- APPEAL FROM JUDGMENT OF CONVICTION**
NOTICE - Unless the court extends the time limit, this application must be completed, signed and filed with the clerk of the Superior Court named below within twenty (20) days from the Date of Judgment. (Show date below.)

DATE OF JUDGMENT

- APPEAL FROM DECISION IN HABEAS CORPUS**
NOTICE - Unless the court extends the time limit, this application must be completed, signed and filed with the clerk of the Superior Court named below within twenty (20) days from the date the notice was issued granting your request for certification. (Show date below.)

DATE NOTICE ISSUED (Granting your request for certification)

INSTRUCTIONS ➔ TO APPLICANT: Prepare in triplicate and file original and one copy with the clerk. Retain one copy for your records.
NOTICE: Applicant/defendant must sign this form under oath.

TO CLERK: Stamp form on filing. File original as a pending matter and give one copy to the Public Defender's Office. Judicial Authority is to assign for hearing within 20 days after filing. Forward written notice of hearing to (1) trial counsel or applicant, if pro se, (2) Public Defender's Office to which application was sent, and (3) Chief of Legal Services, Public Defender's Office.

NAME AND ADDRESS OF COURT

DOCKET NO.	NAME OF CASE
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1. I am indigent and cannot pay the fees, costs and expenses of an appeal, nor can I afford to obtain an attorney.
2. The grounds upon which I propose to appeal are:

(If additional space is needed, attach an affidavit reciting the grounds upon which you propose to appeal.)

3. The facts concerning my financial status are:

(If additional space is needed, attach an affidavit reciting the facts concerning your financial status.)

THEREFORE, I request that the court (1) waive the payment by me of the fees specified by statute, taxable costs, and the requirement of Section 63-5 concerning the furnishing of security for costs upon appeal, if such security has been ordered; (2) appoint counsel to prosecute my appeal without expense to me and permit withdrawal of the trial attorney's appearance, if any; and (3) order that the necessary expenses of prosecuting the appeal be paid by the state, pursuant to Sections 63-6 and 63-7 of the Connecticut Practice Book.

APPLICANT'S SIGNATURE X	SUBSCRIBED AND SWORN TO BEFORE ME ON (Date)	SIGNED (Notary Public/Commissioner of the Superior Court) X
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(Continued...)

ORDER

The court, having found the applicant INDIGENT NOT INDIGENT, hereby orders the application:

GRANTED as follows:

1. The following fees are waived:

Entry fee Record Fee

Other (*Specify*): _____

2. Taxable costs are WAIVED NOT WAIVED

3. Security for costs is WAIVED NOT WAIVED

4. Necessary expenses of prosecuting the appeal SHALL SHALL NOT be paid by the State.

If necessary expenses are paid by the State, attorneys in private practice representing the applicant shall obtain the approval of the judicial authority who presided at the trial before incurring any expense in excess of \$100, including the expense of obtaining a transcript. The judicial authority shall authorize a transcript at State expense only of the portions or proceedings or testimony which may be pertinent to the issues on appeal.

5. All fees and costs are waived and the State shall pay all necessary expenses. See paragraph 4 for limits on necessary expenses.

NAME OF COUNSEL, IF APPOINTED

6. Counsel IS IS NOT appointed.

7. Permission for the withdrawal of the trial attorney's appearance is GRANTED DENIED.

(The judicial authority must be satisfied that trial counsel has cooperated fully with appellate counsel in the preparation of the defendant's appeal prior to granting permission.)

DENIED.

BY THE COURT (<i>Print or type name of judge</i>)	ON (<i>Date</i>)	SIGNED (<i>Judge, Asst. Clerk</i>)	DATE SIGNED
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ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact the clerk of the court at the address shown on the front.